

AFFIDAVIT OF NON-DISCLOSURE

The _____ by signing this
(Insert Company Name)

affidavit agrees that information provided by the Department of Printing may be used solely for the purpose of the printing or mailing contract/job and shall not be shared with, transferred, or sold to any unauthorized third party. You also attest that your firm's employees, associates, and agents will comply with this prohibition of sale, transfer or sharing of confidential information to unauthorized third parties.

Violation of this term may result in termination of contract and subject vendor to monetary, civil, and criminal penalties under federal and state laws.

Company/Printer Name

Signature of Authorized Representative

Date